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BURF-P02-006

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Request	Application Number	10/081,736		
For Continued Examination (RCE)	Filing Date	February 20, 2002		
Transmittal	First Named Inventor	Justin R. Fallon		
Address to: MS RCE	Art Unit	1649		
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Examiner Name	Olga N. Chernyshev		

Attorney Docket Number

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

<ol> <li>Submission required under 37 CFR 1.114 Note: If the RCE is proper, an amendments enclosed with the RCE will be entered in the order in which they we applicant does not wish to have any previously filed unentered amendment(s) ent amendment(s).</li> </ol>	re filed un	less applica	ant instructs otherwise. If		
a. x Previously submitted. If a final Office action is outstanding, any may be considered as a submission even if this box is not chec	amendn ked.	nents filed	after the final Office action		
i. Consider the arguments in the Appeal Brief or Reply Brief pre	eviously f	iled on			
ii. X Other Reply and Amendment Under 37 CFR §1.116 prev	iously file	ed on Sept	ember 21, 2006		
b. Enclosed					
i. Amendment/Reply iii. Information 0	Disclosur	e Stateme	ent (IDS)		
ii. Affidavit(s)/Declaration(s) iv. Other					
2. Miscellaneous					
a. Suspension of action on the above-identified application is requ	ested un	der 37 CF	R 1.103(c) for a		
period of months. (Period of suspension shall not exc					
b. Other					
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 w	hen the F	RCE is filed			
a. X The Director is hereby authorized to charge the following fees, a overpayments to Deposit Account No. 18-1945 . I have					
i. X RCE fee required under 37 CFR 1.17(e)					
ii. Extension of time fee (37 CFR 1.136 and 1.17)					
iii. Other					
b. Check in the amount of \$ enclo	sed				
c. Payment by credit card (Form PTO-2038 enclosed)					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Signature	Date	Novemb	per 20, 2006		
Name (Print/Type) Z. Angela Guo	Registra	tion No.	54,144		

11/24/2006 WABDELR1 00000003 181945 10081736

Dated: November 20, 2006

Alexandria,

PTO/SB/17 (07-06)
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TETHAD	Effective on 12/09/	2004		Complete if Known					
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number 10/081,736						
FEE TRANSMITTAL			Filing Date		February 20, 2002				
			First Named Inv	entor	Justin R. Fallon				
For FY 2005			[	Examiner Name		Olga N. Chernyshev			
x Applicant claims small entity status. See 37 CFR 1.27				Art Unit		1649			
TOTAL AMOUN	TOTAL AMOUNT OF PAYMENT (\$) 395.00				Attorney Docket No. BURF-P02-006				
METHOD OF I	PAYMENT (check	all that apply)							
Check Credit Card Money Order None Other (please identify):									
x Deposit Acce	ount Deposit Account I	Number: 18-1945 Depo	osit Acco	ount Name: Fis	h & Nea	ve IP Group, Ro	pes & Gra	y LLP	
For the a	bove-identified depo	sit account, the Dire	ctor is	hereby authorize	ed to: (che	eck all that apply)			
x Cha	arge fee(s) indicated	below		Charge	e fee(s) ir	ndicated below, ex	cept for th	e filing fee	
X Cha	arge any additional f (s) under 37 CFR 1	ee(s) or underpayme	ent of	x Credit	any over	payments			
FEE CALCULA	<u>`'                                     </u>								
1. BASIC FILING	, SEARCH, AND E	KAMINATION FEES							
	FII	ING FEES	SEA	RCH FEES	EXAM	NATION FEES			
Application Type	oe <u>Fee (\$</u>	Small Entity ) Fee (\$) F	ee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAI		100	•	-				Small Entity	
Fee Description							Fee (\$)	Fee (\$)	
	20 (including Reiss	•					50	25	
	t claim over 3 (incli	iding Reissues)					200	100	
Multiple depende	ent claims						360	180	
<u>Total Claims</u>	Extra Claims	Fee (\$)	Fee P	aid (\$)	Ū	Multiple Dependent Claims			
	· = >				<u>F</u>	<u>fee (\$)</u> <u> </u>	ee Paid (\$	<u>!</u>	
HP = highest number	er of total claims paid for							_	
Indep. Claims	Extra Claims	<del></del>	Fee P	aid (\$)					
HP = highest number	er of independent claims	paid for, if greater than 3.		<del></del>					
3. APPLICATION	SIZE FEE						<del></del>	_	
If the specificati	ion and drawings ex	ceed 100 sheets of p	aper (	excluding electron	onically f	iled sequence or	computer		
		he application size f			or small	entity) for each ac	dditional 50		
		5 U.S.C. 41(a)(1)(G)			4h a	of Fee (\$)	Eoo E	aid (\$)	
<u>Total Sheets</u>	· ·			Iditional 50 or fractional (round up to a who			<u> 1 00 1</u>	ald (w)	
	- 100 =			(round up to a who	ne number	· · —		Paid (\$)	
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) (see 37 395.00									
SUBMITTED BY	<u> </u>	n							
Signature		<del></del>		Registration No.	54,144	Telephone	(617) 951	-7546	
	Z. Angela Gud			(Attorney/Agent)	<u>,</u>		lovember		
(	L. Aligola Ouq							-,	

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Dated: November 20, 2006

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

LOCA (Christine Grace)